

PTO/SB/122 (10-01)

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Application

Address to:
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Washington, D.C. 20231

Application Number	10/050,246
Filing Date	Jan 15, 2002
First Named Inventor	Bum Ki MOON
Art Unit	2811
Examiner Name	Not Assigned Yet
Attorney Docket Number	12205/3

17/03
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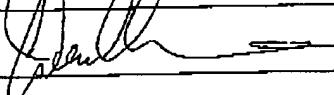
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- Applicant/Inventor.
- Assignee of record of the entire interest.
- Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).
- Attorney or Agent of record.
- Registered practitioner named in the application transmittal letter in an application without an executed oath or declaration. See 37 CFR 1.33(a)(1). Registration Number _____

Typed or Printed
Name

Dexter CHIN (Reg. No.: 38,842)

Signature



Date

02/17/2003

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

*Total of 1 forms are submitted.

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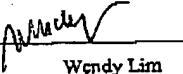
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Subject Matter: US Patent Application Number: 10/050,246
Change of Correspondence Address for Patent Application

Total Pages (including cover sheet): 4 pages

Attachments:

- a) Certificate of Transmission
- b) Transmittal Form
- c) Change of Correspondence Address for
US Patent Application No. 10/050,246

PTO/SB/07 (08-00)

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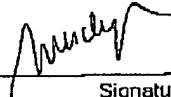
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TRANSMITTAL FORM

(to be used for all correspondence after initial filing)

		Application Number	10/050,246
		Filing Date	01/15/2002
		First Named Inventor	Bum Ki MOON
		Group Art Unit	2811
		Examiner Name	Not Assigned Yet
Total Number of Pages In This Submission	4	Attorney Docket Number	12205/3

ENCLOSURES (check all that apply)

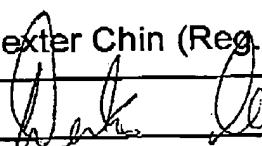
<input type="checkbox"/> Fee Transmittal Form	<input type="checkbox"/> Assignment Papers (for an Application)	<input type="checkbox"/> After Allowance Communication to Group
<input type="checkbox"/> Fee Attached	<input type="checkbox"/> Drawing(s)	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences
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<input type="checkbox"/> Affidavits/declaration(s)	<input type="checkbox"/> Petition to Convert to a Provisional Application	<input type="checkbox"/> Status Letter
<input type="checkbox"/> Extension of Time Request	<input checked="" type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address	<input type="checkbox"/> Other Enclosure(s) (please identify below):
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<input type="checkbox"/> Information Disclosure Statement	<input type="checkbox"/> Request for Refund	
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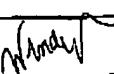
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SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm or Individual name	Dexter Chin (Reg. No.:38,842)	
Signature		
Date	02/17/2003	

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